Bioethics beyond Borders

From the Editors

Saul Steinberg's Message

In the 1970s, artist Saul Steinberg drew one of the most famous cartoons of all times, "View of the World from 9th Avenue." The lower portion of the frame details a Manhattan street scene looking toward the Hudson River; beyond is the rest of the United States, pictured only as some scattered names among a rocky landscape. Other countries are reduced to labeled land masses in the far distance. Steinberg's tongue-incheek depiction is meant to illustrate how people everywhere see the world beyond their own neighborhood from the distortion of their own self-absorption.

Steinberg's message can be applied to bioethics when we allow intellectual myopia to set in and our awareness of current happenings in bioethics stops at our own borders. The country reports in this CQ special section cover a range of topics that have relevance to all of us-wherever our geographical locations may be. They address issues of privacy and confidentiality, the global organ trade, euthanasia and assisted suicide, professional conflicts of interest, and the challenge of balancing access to healthcare and patient entitlements. Through this prism of particular cultural perspectives, our own understanding of the issues is expanded and enriched.

In "Who Do You Think You Are? Identity and Childhood in Australian Healthcare Ethics" Kate Cregan reports on high-profile issues being debated in Australia that center around children's

rights and the capacity of individuals to determine their identity. She examines two case studies: one involving children diagnosed with gender identity disorder and the other a movement led by adult children of anonymous sperm donors to open previously closed medical and legal files. Both debates explore the capacity of individuals to determine their identity and the medical ethical dilemmas that affect their ability to do so.

Ofra Greenberg's "The Global Organ Trade: A Case in Point" presents different perspectives on the global organ trade against the backdrop of the unique and instructive example of Israel. In describing the machinery facilitating organ transplantation among Israeli citizens, she addresses its scope, the state laws, and the health authorities' policies, focusing on both officially sanctioned transplants performed abroad and unofficial attitudes toward this phenomenon.

The next two articles explore current social and legal situations in two European countries with regard to euthanasia and assisted suicide. Roberto Andorno points out that, as an unintended result of a gap in the Swiss Penal Code, Switzerland is the only European country that permits nonphysician-assisted suicide. No particular medical condition is required for receiving such assistance, which is performed by volunteers working for non-profit organizations.

Examining the same topic from a different perspective, in "The French

Euthanasia Debate: Exception and Solidarity," Marta Spranzi notes that the cultural context of different countries fashions the way the discussion unfolds in both the medical community and the society at large. Spranzi describes the characteristics of the French debate with respect to its history, intellectual underpinnings, and current directions. She points to how, in France, the debate is primarily framed in terms of compassion, justice, and solidarity rather than autonomy and rights.

Péter Kakuk and Andrea Domján turn to questions of professionalism in their article, "Healthcare Financing and Conflict of Interest in Hungary: Informal Payments and Challenges to the Integrity of Healthcare Ethics." The authors examine "irregular payments," a form of financial conflict of interest imbedded in the country's health system, which create a bias in physician's attitudes and decisionmaking. These informal—but expected—additional payments to public sector physicians are believed by patients to have a positive effect on the quality of the service they receive as well as their access to care.

In "Philosophy for Public Good: The Current State of Bioethics in Serbia" Vojin Rakić offers *CQ* readers an update on the considerable progress made on two debates of particular importance in Serbian society: abortion and the lax restrictions on the use of neuropharmacology. As his report shows, the in-

creased involvement of the Serbian philosophical community has had a strengthening effect on the bioethics debates, and it remains to be seen whether the society at large will take advantage of the opportunity that has been created to use bioethics as a powerful force for public good.

"What is the best way to accommodate individual differences and maintain the common good in a multicultural society?" is the question Rosana Trivano raises in "Religious Minorities and Justice in Healthcare: The Current Situation in Spain." The transition to democracy and the incorporation of people from different backgrounds and with different worldviews have created tensions that are manifested in Spain's healthcare. Increased globalization brings different moral and religious beliefs that struggle to coexist with traditional ones. At the same time, democracy requires that all patients be provided adequate medical care and equal access to healthcare. A conflict ensues between the obligations of the Spanish healthcare system and the entitlement of patients to specific therapeutic practices of their own choice.

As this Bioethics beyond Borders special section demonstrates, unlike politics, all bioethics is not local. The bioethics world is larger and wider than we know, and it is our responsibility to not fall prey to the parochialism portrayed in Steinberg's cartoon.